



TO: Maggie Bullock, Director, Montana State Planning Grant

FROM: Lynn A. Blewett, Ph.D., SHADAC

DATE: September 21, 2006

RE: Suggested questions to include in subsequent Montana BRFSS questionnaires

Attached are example questions that we recommend be considered as additions to the Montana Behavior Risk Factor Surveillance System (BRFSS). As I understand the process, specific questions must be submitted to the BRFSS staff for review and approval by their steering committee. The attached questions are in line with the recommendations laid out in a related memo dated September 21, 2006: "Using the BRFSS to Monitor the Uninsured in Montana". We recommend three additional areas be added to the MT BRFSS to increase its value in monitoring changes in the distribution of health insurance coverage. Specific questions include: (1) two questions on health insurance coverage type and access; (2) three questions on employment characteristics, and (3) a specific recommendation on the addition of a children module that would include the health insurance questions similar to those asked of adults. As mentioned in our previous memo, these questions if included in the BRFSS would need to be integrated and adjusted according to the state BRFSS core, current policy priorities, available resources and data needs. Another consideration prior to including questions is the length of the survey so as not to burden the respondent or the interviewer.

SHADAC reviewed questions obtained from several surveys including SHADAC Coordinated State Coverage Survey (or the CSCS) instrument; the 1997 SLAITS Health Pilot Test Questionnaire used in Iowa and Washington; the 2003 Montana household survey; and select Montana state BRFSS questionnaires. We selected the attached questions (Table 1) as meeting the state's objectives to use the MT BRFSS to monitor health insurance coverage and access to care. These questions would generate additional descriptives and valuable trend data on health insurance coverage type/source, access and employment characteristics for the state.

If the DPPHS BRFSS staff is interested in including specific health insurance-related questions on children in the state BRFSS questionnaire, SHADAC could provide these on further request.

Table 1: Recommended State Add-On Questions for MT BRFSS - September 2006

Concept Measured	Survey Question	Survey Source	
Health Insurance-related Questions			
Type/ source of coverage	What type of insurance are you covered by? 01. Medicare 02. Railroad Retirement Plan 03. TRICARE/CHAMPUS 04. Indian Health Service 05. Medicaid 06. S-CHIP 07. Health insurance through your work or union 08. Health insurance through someone else's work or union 09. Health insurance bought directly by you 10. Health insurance bought directly by someone else 12. No Private or Public Insurance 12. Non-Insurance Payment Source 97. DON'T KNOW 99. REFUSED	SHADAC CSCS/ household grid	
Access/ regular source of care	When you are sick or need advice about your health, to which one of the following places do you usually go? WOULD YOU SAY: [PLEASE READ] 1 A doctor's office 2 A public health clinic or community health center 3 A hospital outpatient department 4 A hospital emergency room 5 Urgent care center 6 Some other kind of place 8 No usual place [DO NOT READ.] 7 Don't know 9 Refused	2002 MT BRFSS Core	

Employment Characteristics-related Questions			
Hours per week worked	How many hours per week do you usually work at your primary place of employment?	SHADAC CSCS	
Primary place of employment	Thinking about your primary place of employment, is it the government, a private company, a non-profit organization, or are you self-employed or working in a family business? 1. GOVERNMENT 2. PRIVATE FOR PROFIT COMPANY 3. NON-PROFIT ORGANIZATION INCLUDING TAX EXEMPT AND CHARITABLE ORGS 4. SELF EMPLOYED 5. UNPAID WORKER FOR A FAMILY BUSINESS 7. DON'T KNOW 9. REFUSED	SHADAC CSCS	
Total workforce employed	Counting all locations where this employer operates, what is the total number of persons who work for your employer? 01. Just one 02. Between 2 and 10 03. Between 11 and 24 04. Between 25 and 50 05. Between 51 and 100 06. Between 101 and 500 07. Over 500 97. DON'T KNOW 99. REFUSED	SHADAC CSCS	